



Inspection Report under the *Long-Term Care Homes Act, 2007*

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

**Ministère de la Santé et des Soins de
longue durée**
Division de la responsabilisation et de la performance du
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	<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection	January 13, 2011	Inspection No/ d'inspection 2011_170_2926_13Jan115638
Licensee/Titulaire	Steeves & Rozema Enterprises Limited, 265 North Front Street, Suite 200, Sarnia, ON N7T 7X1	
Long-Term Care Home/Foyer de soins de longue durée	St. Andrew's Terrace Long Term Care Community, 255 St. Andrews Street, Cambridge, ON N1S 1P1	
Name of Inspector/Nom de l'inspecteur	Dianne Wilbee #170	
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a complaint inspection related to a fall and continence care.		
During the course of the inspection, the inspector(s) spoke with: Administrator, Resident Care Liaison, 2 Registered Practical Nurses, 3 Personal Care Workers, RAI Co-ordinator, 1 Resident.		
During the course of the inspection, the inspector: Reviewed resident record, reviewed applicable policies and procedures, toured the resident home area, observed the resident, observed general resident population		
The following Inspection Protocols were used in part or in whole during this inspection:		
<ul style="list-style-type: none">• Falls Prevention• Continence Care		
<input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:		
3 WN 3 VPC		



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NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Référencement envoyé

CO – Compliance Order/Ordre de conformité

WAO – Work and Activity Order/Ordre: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Non-compliance with requirements under the *Long-Term Care Homes Act, 2007* (LTCHA) was found. (A requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)

Le suivant constitue un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with O.Reg. 79/10, s.26(3)1,5,10,15. A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

1. Customary routines.
5. Mood and behaviour patterns, including wandering, any identified responsive behaviours, any potential behavioural triggers and variations in resident functioning at different times of the day.
10. Health conditions, including allergies, pain, risk of falls and other special needs.
15. Skin condition, including altered skin integrity and foot conditions.

Findings:

The resident's current plan of care printed October 6, 2010 did not include interdisciplinary assessment as follows:

- # 1. Family involvement in care on a frequent basis.
- # 5. Interventions for exhibited behaviours.
- # 10. Risk for falls.
- # 15. Skin Integrity concerns.

Inspector ID #: 170

VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure the plan of care covers all aspects of care, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg. 79/10, s.50(2), Every licensee of a long-term care home shall ensure that,

- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,
- (iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated;

Findings:

- The resident exhibited altered skin integrity and was not reassessed at least weekly by a member of the registered nursing staff.



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Inspector ID #:	170
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VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance related to reassessment at least weekly for altered skin integrity, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6(9)1, The licensee shall ensure that the following are documented:

1. The provision of the care set out in the plan of care.

Findings:

- The provision of care set out in the plan of care for the resident was not documented by registered staff on the December 2010 eTAR for nine treatments from December 7 to 13, 2010.

Inspector ID #:	170
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VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance related to documentation of treatments on the electronic Treatment Administration Record, to be implemented voluntarily.

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
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Title:	Date:	Date of Report: February 3, 2011
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